



Attomey's Docket No	U010440-6	PATENT
COMBINED DE	CLARATION AND POW	ER OF ATTORNEY
(ORIGINAL, DESIGN, NA	TIONAL STAGE OF PCT, SE CONTINUATION OR C-I-	UPPLEMENTAL, DIVISIONAL, P)
As a below named inventor	I hereby declare that:	
	TYPE OF DECLARATION	ON
This declaration is of the fo	llowing type: (check one app	olicable item below)
original		
design	• *	
supplemental		
NOTE: If the declaration is for continuation-in-part app	r an International Application beil lication, do <u>not</u> check next item; ch	ng filed as a divisional, continuation or eck appropriate one of last three items.
national stage of		
NOTE: If one of the following 3 CONTINUATION OR C-	items apply, then complete and also I-P.	attach ADDED PAGES FOR DIVISIONAL,
☐ divisional		
continuation		
continuation-in-p	art (C-I-P)	
IN	VENTORSHIP IDENTIFIC	CATION
WARNING: If the inventors are the ownership of all	each not the inventors of all the cla the claims at the time the last claimed	ims, an explanation of the facts, including dinvention was made, should be submitted.
I believe I am the original, to original, first and joint invent	irst and sole inventor (if only	s stated below next to my name. one name is listed below) or an below) of the subject matter which ention entitled:
	TITLE OF INVENTIO	N
MULTICOMPONENT C	LOSTRIDIAL VACCINES	S USING SAPONIN ADJUVANTS

(Declaration and Power of Attorney [1-1]-page 1 of 6)

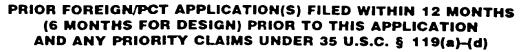




SPECIFICATION IDENTIFICATION

the specification of which: (complete (a), (b) or (c))
(a) is attached hereto.
(b) ☑ was filed on September 29, 1995 as ☐ Senal No. 0 /_ or ☑ Express Mail No., as Senal No. not yet known EF389775541
or Express Mail No., as Serial No. not yet known EF389775541 and was amended on (if applicable)
NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.
(c) was described and claimed in PCT International Application No.
amended under PCT Article 19 on (if any).
ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56
(also check the following items, if desired)
and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and
In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.
PRIORITY CLAIM (35 U.S.C. § 119(a)-(d))
I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)–(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.
(complete (d) or (e))
(d) no such applications have been filed.
(e) such applications have been filed as follows.
NOTE: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

(Declaration and Power of Attorney [1-1]—page 2 of 6)



COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)		CLAIMED 7 USC 119
			☐ YES	NO 🗆
			☐ YES	NO 🗆
			☐ YES	NO 🗆
			☐ YES	NO 🗆
			☐ YES	NO 🗆

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S) (34 U.S.C. § 119(e))

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER	FILING DATE
/	
/	

CLAIM FOR BENEFIT OF EARLIER US/PCT APPLICATION(S) UNDER 35 U.S.C. 120

The claim for the benefit of any such applications are set forth in the attached ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CONTINUATION-IN PART (C-I-P) APPLICATION.

(Declaration and Power of Attorney [1-1]—page 3 of 6)





ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR C-I-P APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. § 120.

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

PAUL B. WEST, 18947 JOSEPH H. HANDELMAN, 26179 JOHN RICHARDS, 31053 JOHN J. CRYSTAL, 26360 RICHARD J. STREIT, 25765 ALAN K. ROBERTS, 17777 S. DEVALLE GOLDSMITH, 14383

PETER D. GALLOWAY, 27885 IAIN C. BAILLIE, 24090 THOMAS F. PETERSON, 24790 RICHARD P. BERG, 28145 JULIAN H. COHEN, 20302 WILLIAM R. EVANS, 25858 JANET I. CORD, 33778

(check the following item, if applicable)

Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

LADAS & PARRY
26 WEST 61ST STREET
NEW YORK, NEW YORK 10023

(212)708-1930

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.



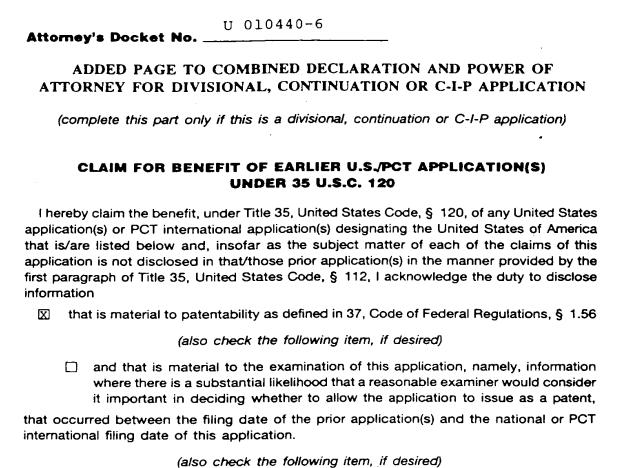
NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY FOR LAST NAME		
		· ·		
	1)a			
Date 2 Date	1996 Country of Citizenship)		
Residence LINCOL	N, NEVEDA			
Post Office Address	1020 ROCKHURST DRIVE, L	INCOLN NEVADA 685		
	<u> </u>			
Full name of second j	joint inventor, if any			
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)		
•		·		
•	Country of Citizenship			
	_	· · · · · · · · · · · · · · · · · · ·		
Residence				
Post Office Address Full name of third join	nt inventor, if any			
Full name of third join	nt inventor, if any (MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)		
Full name of third join (GIVEN NAME) Inventor's signature	nt inventor, if any (MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)		
Full name of third join (GIVEN NAME) Inventor's signature	nt inventor, if any (MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)		

(Declaration and Power of Attorney [1-1]—page 5 of 6)

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(check proper box(es) for any of the following added page(s) that form a part of this declaration) ☐ Signature for fourth and subsequent joint inventors. Number of pages added Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added _____ ☐ Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added ______ ☐ Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time (37 CFR 1.47). Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (C-I-P) application. Number of pages added _____3 ☐ Authorization of attorney(s) to accept and follow instructions from representative. (if no further pages form a part of this Declaration, then end this Declaration with this page and check the following item) ☐ This declaration ends with this page.



In compliance with this duty, there is attached an information disclosure statement

in accordance with 37 C.F.R. 1.98.

			NS OR PCT INTERI U.S. FOR BENEFIT			
U.S.	Status (check one)					
U.S. APPLICATIONS U.S. F		FILING DATE	Patented	Pending	Abandoned	
1.0 /			 			
2. 0 /						
3. 0 / PCT APPL			SNATING THE U.S.			
PCT APPLI- CATION NO. DATE		U.S. APPLICATION NOS. ASSIGNED (if any)				
PCT/US94/ 4.03395	Mar.29	,1993	0 /			
5			0 /			





35 USC 119 PRIORITY CLAIM, IF ANY, FOR ABOVE LISTED U.S./PCT APPLICATIONS

ABOVE APPLICATION NO.	DETAILS OF FOREIGN CLAIM	M WHICH PRIORITY 119	
	Country and Application No.	Date of filing (day, month, year)	Date of issue (day, month, year)
1.			
2.			
3.			
4.	U.S. 08/038,428	Mar. 29, 1993	
5.			
6.			





PTO/SB/01(12/97)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Please type a plus sign (+) inside this box \rightarrow

+

DECLARATI	ON FOR UTILITY OR	Attorney Docket Number	PC9047B			
	DESIGN	First Named Inventor	David S. Roberts			
PATEN'	T APPLICATION	COMPLETE IF KNOWN				
(37 CFR 1.63)		Application Number	08/536,970			
Declaration submitted with Initial Filing	Declaration Submitted after Initial	Filing Date	September 29, 1995			
	Filing (surcharge 37 CFR 1.16 (e))	Group Art Unit	1641			
	required)	Examiner Name	V. Portner			

As a below named inventor My residence, post office add	, i neleby declare tha					
My residence, post office add	race and citizanchin a		ıme			
() I'm a low the existent firm	•	-		d ioint inventor (if	pluret	
names are listed below) of the	e subject matter which	only one name is listed below) or is claimed and for which a pater	it is sought on the in	vention entitled:	piurai	
MU	JLTICOMPONENT CL	OSTRIDIAL VACCINES USING	SAPONIN ADJUV	ANTS		
	 	(Title of the Invention)				
the specification of which is attached hereto OR was filed on (MM/DD/	YYYY) [09/29/95	as Unite	d States Application N	lumber or PCT Inter	national	
I hereby state that I have revie amended by any amendment	ewed and understand t specifically referred to	is amended on (MM/DD/YYYY) the contents of the above identification above. In is material to patentability as defined the second of the secon				
certificate, or 365(a) of any P America, listed below and have	CT international applicate also identified below	C. 119(a)-(d) or 365(b) of any focation which designated at least on the control of the control of the control of the application of the application.	one country other th on application for pa	nan the United Sta Itent or inventor's	ates of	
or of any PCT international application having a filing date before that of the application on which priority is claimed. Prior Foreign Application Foreign Filing Date Foreign Filing Date Priority Certified Copy Attached? Not Claimed						
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES	ppy Attached?	
Number(s)	Country	(MM/DD/YYYY)	Not Claimed		• •	
Number(s)	Country	(MM/DD/YYYY)	Not Claimed		• •	
Number(s)	Country	(MM/DD/YYYY)	Not Claimed		• •	
Number(s)	Country	(MM/DD/YYYY)	Not Claimed		• •	
	·			YES	• •	
☐ Additional foreign application	n numbers are listed or	(MM/DD/YYYY) n a supplemental priority data sh	eet PTO/SB/02B at	YES	• •	





PTO/SB/01 (12/97)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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	DECLARATION Utility or Design Patent Application hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the												
United States United States information wh and the national	of America, or PCT Intendich is material or PCT Inter	listed below ernational applic rial to patentab rnational filing d	and, insofar a ication in the i bility as define date of this appli	as the subject manner provided in 37 U.S.	ct matter ided by th	r of e the fir	each of the first paragra	the claims raph of 35	of this ap	application 112, I a	ion is not acknowledge	ng the disclosed in the te the duty to disc of the prior applica	close
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Peter C. Ric	chardson			27,526			Mark Dr					28,775	
Allen J. Spie	egel			25,749		1	Lawrence	iće C. Ake	ers	Ì		28,587	ļ
Paul H. Gin:	sburg			28,718			A. Dean			Ī		31,185	!
J. Trevor Lu				28,567				E. Brokke		Ì		32,723	ļ
James T. Jo				30,561 30,977				M. Fedov C. Zielinsk		Ī		33,688 34,462	ļ
Gregg C. Be Robert F. Si			1	30,977 31,304			_	J. Zieii⊓sk T. Ronau		Ì		34,462 36,257	ļ
Grover F. Fr	•		1	31,304				othy Crea		Ì		39,156	1
Karen DeBe				32,977			Alan L.		9	Ī		37,371	1
Phillip C. St				34,258				W. Apple		Ī		35,428	,
Lorraine B.	_			35,251				L. Konst		Ī		37,864	ļ
Garth Butter	erfield		}	36,997				h B. Rubii	'n	I	36,259		1
Carl J. Gode				39,203				. Jacobs	:11	1		32,140 31,820	ļ
Raymond M			1	26,810 40,049		Martha A. Gammill Gregory P. Raymer		1	31,820 36,647		ļ		
Jennifer A. I Jacob M. Le			Ì	40,049 32,509				y P. Kayıı or Donahı		Ī		35,492	1
Israel Nisse				27,582				Waldron				42,208	
		practitioner(s) na	amed on supple		tered Pra				PTO/SB/0	2C attar	ched hereto		
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Name	Paul H. Gins	sburg											
Address	Pfizer Inc							<u> </u>					
Address		2nd Street, 20t	th Floor										
City	New York		1	State		Nev	w York		Zip Co	ode	10017-57	755	
Country		es Of America	Te	elephone			2)573-236	9	Fax		(212)573	3-1939	
I hereby decl believed to be punishable by	dare that all	statements ma further that th prisonment, or	ade herein of	my own kn	nowledge	are	true and	that all se that willfi	ful talse s	stateme	ents and th	mation and belief the like so made ze the validity of	are 1
Name of Sol	le or First In	ventor:	A petition h	as been filed	I for this	unsi	igned inve						
	Given Name	(first and mide	dle [if any])		·			Fami	ily Name	or Sur	name		
David S.					Robert	ts					-		
Inventor's Signature						_			· · · · · · · · · · · · · · · · · · ·	Date	*		
Residence:	City	Philadelphi	iia	State	PA	-1'	Country	USA	'	Citiz	zenship	USA	
Post Office		 	ington Squa	re South, A		3							
Post Office			<u></u>		<u>r</u>								
City		Philadelphia	State	PA	Zip	T	19106	Coul	intry	USA			
	nal inventor	s are being na								B/02A	attached	hereto.	





PTO/SB/02A(3/97)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joi	nt Inventor, if a	any: 📗	A peti	tion has b	een filed for th	is unsigned inve	entor	
Given Name (first and middle [if any])				Family Name or Surname				
Don A.				Dearwe	ester			
Inventor's Signature	1 Day () L			law	estin		Date	7-30-99
Residence: City	Westerly		State	RI	Country	USA	Citizenship	USA
Post Office Address	Pfizer Inc.							
Post Office Address	Eastern Point Road							
City	Groton	State	СТ	Zip	06340	Country	USA	